

**REVOCATION OF POWER OF
 ATTORNEY WITH
 NEW POWER OF ATTORNEY
 AND
 CHANGE OF CORRESPONDENCE
 ADDRESS**

Application Number 10/506,813

| | |
|----------------------|---------------------------|
| Filing Date | January 12, 2005 |
| First Named Inventor | Markus OLES <i>et al.</i> |
| Art Unit | 1794 |
| Examiner Name | Matthew D. MATZEK |

Attorney Docket Number, 032301.602 (formerly 39509.205611)

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application.

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1:1 Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | |
|-----------|--|-----------|
| Signature | | |
| Name | <i>Dr. Hans-Ludwig Hirsch</i> <i>Dr. Martin Feldmann</i> Dr. Hans-Ludwig Hirsch (Authorised Officer) Dr. Martin Feldmann (Authorised Manager) | |
| Date | <i>June 8, 2009</i> | Telephone |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
 Submit multiple forms if more than one signature is required, see below*.

■ *Total of 1 forms are submitted.

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